	AP	APPLICATION AS FILED - PART I					10/09/1290		
		(Column 1)	(Caluma 2)	SMALL	ENTITY	OR	OT	HER THAN	
•	BASIC FEE	NUMBERFRED	NUMBER EXTRA			UK	SMA	ALL ENTITY	
	(37 CFR 1.16(a), (b), as (c)) SEARCH FEE			RATE (\$)	FEE (S)		RATE	FEE (8)	
	(3) CFR 1.18(N). (1). Or (m)) EXAMINATION FEE			7					
				1					
<u> </u>	(37 CFR 1.16(1)) INDEPENDENT CLAIMS	mtnus 20 =							
Ŏ,	(37 CFR 1.18(h))	. minus 3 a		1 × ·		OR	x		
	APPLICATION SIZE	If the specification	rawings exceed 100	1 × ·			x		
3	FEE (37 CFR 1 16(s))	is \$250 (\$125 /-	Lauon Size fee due			1		+	
\$		35 U.S.C. 41(4)(1)(3)	action thereof. See	11 1	1				
	MULTIPLE DEPENDENT	LAIM PRESENT (37 CFR 1.16	m			L		1	
3	* If the difference in column	t is loss than zoro, enter "O" in		 					
, T	APPLICAT	ION AS AMENDED - P	coumn 2.	TOTAL:			TOTAL	 	
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~	4 9/20/05 REM	AINING HIGH	ER PRESENT	RATE (S)		 	SMALL	ENTITY	
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•	Cor or a regul		2	25	EE (S)	-		TIONAL FEE (\$)	
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	FIRST PRESENTATION OF	MURTIPLE DEPENDENT CLAIL			OR OR	X	500 =		
		THE DEPENDENT CLAIM	(37 CFR 1 16(J)			F	\Rightarrow		
				TOTAL .	OR OR	701	(A)		
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Substitute for Form PTO-875

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FIRST PRESENTATION OF LIVE TIPLE DEPENDENT CLARE (J) CFR 1 16(j))

independent (3) CFR 1 (64A))

Application Size Fee (37 CFR 1.16(s))

Linus

"If the entry in column 1 is less than the entry in column 2, write "0" in column 3

"If the "Highest Humber Previously Paid For" IN THIS SPACE is less than 20, enter "20"

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20"

This collection of information is required by 37 CFR 1,16. The information is required to obtain or retain a benefit by the public which is to file (and by the uncluding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments and frademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

**ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FEE (\$)

OR

OR

OR

If you need assistance in completing the form, call 1-SNA-PTC-9199 and select option 2